

FEE TRANSMITTAL

Electronic Version v09

Stylesheet Version v08.0

Title of Invention	ELECTRO-WETTING DISPLAYS																					
Application Number :																						
Date :																						
First Named Applicant:	Dr. Joseph M. Jacobson																					
Attorney Docket Number:	H-390																					
TOTAL FEE AUTHORIZED \$ 572																						
Patent fees are subject to annual revisions on or about October 1st of each year.																						
Filing as small entity																						
BASIC FILING FEE																						
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>395</td><td>395</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 395</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	395	395	Subtotal For Basic Filing Fees: \$ 395										
Fee Description	Fee Code	Amount \$	Fee Paid \$																			
Utility Filing Fee	2001	395	395																			
Subtotal For Basic Filing Fees: \$ 395																						
EXTRA CLAIM FEES																						
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 25</td><td>5</td><td>2202</td><td>9</td><td>45</td></tr><tr><td>Independent Claims : 6</td><td>3</td><td>2201</td><td>44</td><td>132</td></tr><tr><td colspan="4">Subtotal For Extra Claims Fees: \$ 177</td></tr></tbody></table>				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 25	5	2202	9	45	Independent Claims : 6	3	2201	44	132	Subtotal For Extra Claims Fees: \$ 177			
Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$																		
Total Claims : 25	5	2202	9	45																		
Independent Claims : 6	3	2201	44	132																		
Subtotal For Extra Claims Fees: \$ 177																						
AUTHORIZED BILLING INFORMATION																						
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																						
Deposit account number:	501162																					
Access Code	*****																					
Deposit name:	E Ink Corporation																					
Deposit authorized name:	David J. Cole																					
Signature:	/Shipley/																					
Date (YYYYMMDD):	2004-10-05																					
Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.																						